PUBLIC UTILITIES COMMISSION

505 VAN NESS AVENUE SAN FRANCISCO, CA 94102-3298



September 15, 2005

To: All Telecommunications Carriers

Subject: Lockbox Instructions and Electronic Filing (EF)

The Telecommunications Division is informing carriers of the following changes for the surcharge remittance process:

- 1. Mailing instructions for the remittance of surcharges for California High Cost Fund-B, California Relay Service/Communications Device Fund and Universal Lifeline Telephone Service will change effective September 19, 2005. See attached sample Combined Telephone Surcharge Transmittal (surcharge) form. All carriers are required to utilize EF for reporting total billings and surcharges to the Commission (see item no. 2). EF will have the most current surcharge rates and mailing instructions. Avoid late interest charges on late surcharges by using the correct mailing addresses. The Commission will contact companies that remit by automated clearinghouse (ACH).
- 2. In my letter to you dated June 8, 2004, all carriers were instructed to report using EF. The EF homepage is located at http://telsql1.cpuc.ca.gov. Effective September 30, 2005, the Commission will stop processing surcharge forms mailed for manual data entry. EF users do not need to mail a copy of the surcharge form to the Commission. However, when you do owe surcharges, you must attach a copy of the surcharge transmittal form with your check to the appropriate fund.

Carriers over ninety days late in reporting surcharges, or ninety days after the due date for deminimus filers, are out-of-compliance and are subject to revocation of your carrier's Certificate of Public Convenience and Necessity, which authorizes the carriers to provide telecommunications services in California.

It is highly recommended all carriers maintain a current e-mail and mailing address with the Commission. Also, in my letter to you dated June 8, 2004, we announced effective July 1, 2004, that the Division will use e-mail to send official notices and other regulatory compliance inquiries to you. See your contact information and update if necessary at: http://www.cpuc.ca.gov/telcocarriers.

For questions regarding EF and surcharge remittances, please contact Mike Coen (415.703.2628 or mwc@cpuc.ca.gov). For questions regarding contact information please e-mail: telco_answer@cpuc.ca.gov.

Sincerely,

John M. Leutza, Director Telecommunications Division

Jack Leutza Mr

Attachment

COMBINED CALIFORNIA PUC TELEPHONE SURCHARGE TRANSMITTAL

MONTH ENDED / (YYYY)	SIX-MONTH ENDED / (YYYY)
Carrier Name:	
Utility Identification Number: or	check here, if application/registration pending.
1. TOTAL INTRASTATE END-USER BILLINGS SUBJECT	CT TO SURCHARGE FOR THE PERIOD:\$
2. UNIVERSAL LIFELINE TELEPHONE SERVICE PRO	GRAM (ULTS) *
Surcharge Amount Due Adjustments +/(-)	=
A A A A A A A A A A A A A A A A A A A	y of this form to: ULTS, PO Box 45130, San Francisco, CA 94145-0130.
3. CALIFORNIA RELAY SERVICE/COMMUNICATION	
Surcharge Amount Due +/(-) Adjustments +	Interest/Penalty Total
1.33 1/2 VATA 1.23 VATE 1.34 VATE 1.	copy of this form to: CRS/CDF, PO Box 45140, San Francisco, CA
4. CALIFORNIA HIGH COST FUND A (CHCF-A)	
Surcharge Amount Due +/(-) Adjustments +	Interest/Penalty Total
Make check payable to CHCF-A. Send check and a signed of 0118.	copy of this form to: CHCF-A, PO Box 45118, San Francisco, CA 94145-
5. CALIFORNIA HIGH COST FUND B (CHCF-B) *	
Surcharge Amount Due +/(-) Adjustments	Interest/Penalty Total
Make check payable to CHCF-B. Send check and a signed 0121.	opy of this form to: CHCF-B, PO Box 45121, San Francisco, CA 94145-
6. CALIFORNIA TELECONNECT FUND (CTF)	
Surcharge Amount Due +/(-) Adjustments	=
CONTRACTOR	Interest/Penalty Total
Make check payable to CTF. Send check and a signed copy	of this form to: CTF, PO Box 45254, San Francisco, CA 94145-0254.
I hereby certify that this return, including accompanying schedu and belief is a true, correct and complete return	les and statements, has been examined by me and to the best of my knowledge
SIGNATURE	DATE TELEPHONE NUMBER EXT.
Typed Name	Title
Name of Reporting Agent if not carrier:	95
Street	
City	State Zin Code

SEND A SIGNED COPY OF THIS FORM TO:

CALIFORNIA PUBLIC UTILITIES COMMISSION PUBLIC PROGRAMS BRANCH, TELECOMMUNICATIONS DIVISION 505 VAN NESS AVE SAN FRANCISCO, CA 94102

Reporting at Electronic Filing (EF) is required at http://TELSQL1.CPUC.CA.GOV

* Please note address change effective 9/19/05.

REV 9/15/05